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PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0851-0032
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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit on original and a duplicate for processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification
(Preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets 367]

5. Oath or Declaration [Total Pages 5]

a. Newly executed (original or copy)

b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)

i. DELETION OF INVENTOR(S)

Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).

6. Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No. 09, 620,606

Prior application information:

Examiner M. Tran

Group Art Unit: 2818

For CONTINUATION OR DIVISIONAL PPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	Insert Customer No. or Attach Bar code label here			<input type="checkbox"/> or <input checked="" type="checkbox"/> Correspondence address below
Name	Edward L. Pencoske			
Address	Thorp Reed & Armstrong, LLP			
City	One Oxford Centre, 301 Grant Street, 14th Floor	State	PA	Zip Code
Country	United States	Telephone	(412) 394-7789	Fax

Name (Print/Type)	Edward L. Pencoske	Registration No. (Attorney/Agent)	29,688
Signature	Edward L. Pencoske	Date	20/10/01

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FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 710)

METHOD OF PAYMENT

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 20-0888

Deposit Account Name

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity
Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$) Code (\$)

101	710	201	355	Utility filing fee
106	320	206	160	Design filing fee
107	490	207	245	Plant filing fee
108	710	208	355	Reissue filing fee
114	150	214	75	Provisional filing fee

Fee Paid

710

SUBTOTAL (1) (\$ 710)

2. EXTRA CLAIM FEES

Total Claims	19	Extra Claims	Fee from below	Fee Paid
Independent Claims	3	-20**	= 0	= 0
Multiple Dependent	3	-3**	= 0	= 0

Fee from below	Fee Paid
0	0
80	0
0	0

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$) Code (\$)

103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	* Reissue independent claims over original patent
110	18	210	9	* Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

*or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	226	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	248	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0)

Complete (if applicable)

Registration No. (Attorney/Agent) 29,688 Telephone (412) 394-7789

Date 20 June 01

SUBMITTED BY

Name (Print/Type)	Edward L. Pencoske
Signature	

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